

Out-of-body experience a neurological disorder?

Posted 07:45pm (Mla time) Jan 24, 2005

By Jaime Licaucó

Inquirer News Service

From: http://news.inq7.net/lifestyle/index.php?index=1&story_id=25320&col=3

Editor's Note: Published on page C3 of the January 24, 2005 issue of the Philippine Daily Inquirer.

HOW does science look at the phenomenon of out-of-body experience (OOBE) or astral projection?

My Australian friend, Donald McDowall, a well-known chiropractor and psychic researcher from Australia who is married to a Filipina clairvoyant, Annie, gave me a copy of an article from the Internet explaining OOBE from a neurological standpoint.

The article (OOBE and their Neural Basis) began with a description of a typical out-of-body experience:

"I was in bed and about to fall asleep when I had the distinct impression that I was at the ceiling level looking down at my body on the bed. I was very startled and frightened; immediately (afterwards) I felt that I was consciously back in the (body on the) bed again."

The author, Professor Olaf Blanke of the Laboratory of Cognitive Neuroscience in a Swiss University, says "recent neurological evidence shows that these experiences are related to an interference with the

temporo-parietal junction of the brain. This is the part of the brain that gives a person a sense of selfhood.

Ten percent

Blanke says OOBE occurs in about 10 percent of the population, most of the world's cultures and several medical conditions.

I wonder how he arrived at the 10 percent figure. I would assume majority of people have such experiences. However, many are reluctant to tell their stories.

Blanke adds: "Some clinicians have observed OOBE in association with various neurological conditions, but mainly in epileptic seizures and migraine. These early reports have also allowed us to link OOBE with deficient visual, vestibular, and multi-sensory processing."

Notice how scientists regard OOBE as not normal. They suggest sickness.

Blanke says: "On the basis of these findings, our team proposed a cognitive model for OOBE relating them to failure of integration of proprioceptive, tactile, and visual information of one's body (personal space)."

Let me try to say this in simple language. In a normal state, we know exactly where we are in relation to our body and surroundings. We sense ourselves as being inside our physical body.

When we think or sense ourselves to be out of our body, that is because there is an interference or anomaly in our sense of where we are in relation to our surrounding. We seem to think we are outside our body but actually we are not. In other words, neuroscientists think OOBE is merely a hallucination.

Because science has no knowledge of the astral body, its characteristics or powers, it creates a model based merely on physiological and neurological evidence.

Contradictions

But certain facts contradict this. If OOB is merely hallucination or a neural defect, how come there are people who see the astral body or etheric double of someone having an OOB? Sometimes the astral body is seen very far from the physical body of the sleeping person. If a theory contradicts a proven fact or experience, something's wrong with the theory.

Some scientists propose the most incredible theories just to maintain their own assumptions about the nature of physical reality. For example, one scientific theory on why natives of Fiji, Indonesia, Brazil, India and the Philippines are able to walk on fire is: "The natives have developed very powerful sweat glands on their feet, so that when they touch the burning charcoal or fire they are activated, thus cushioning the effects of the fire. The sweat glands cool the fire and therefore enable them to walk easily on it."

It would be nice if proponents of this theory tried walking barefooted on fire to test their theory.

Despite its obvious inadequacy (I walked on fire without getting hurt, although I don't have thick sweat glands) the theory is accepted by most scientists.

Near-death experience

Another phenomenon whose scientific explanation does not jibe with facts is near-death experience (NDE). In a typical NDE, as studied by Dr. Raymond Moody, a person is pronounced clinically dead. In that state, the person sees himself traveling through a tunnel with a bright light at the end. He moves toward the light, usually seen as a being who asks him questions.

The being of light tells him it's not yet his time and to go back to earth. He wakes up feeling the pain of an accident if it is an accident or labor pains, etc. Then his/ her life is transformed. He feels a sense of mission and exhibits previously absent psychic powers.

Scientists working with experimental pilots in Canada have a different explanation. They think NDE is caused by a lack of oxygen in the brain.

When pilots are in a rotating machine, the centrifugal force temporarily deprives the brain of oxygen. Pilots lose consciousness and get a sensation of floating or being out of the body and going through a tunnel where a seemingly being of light tells them it is not yet their time and they have to go back. They wake up remembering every detail of the incident, like in a typical NDE.

But there's one big difference. Pilots who experience this do not develop a sense of mission, neither do they acquire a new insight into their life. They are not transformed like those with actual NDE and do not develop psychic powers. These facts are ignored by scientists.

E-mail jllicauco@edsamail.com.ph. Visit website at www.angelfire.com/journal/licauco